

P05 0000540/2

Florida Department of State
Division of Corporations
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COR AMND/RESTATE/CORRECT OR O/D RESIGN

GOODHEALTH WORLDWIDE ADMINISTRATORS INC.

RECEIVED
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Help

D/C Amend

D 09-25-09



September 24, 2009

FLORIDA DEPARTMENT OF STATE

Division of Corporations

GOODHEALTH WORLDWIDE ADMINISTRATORS INC.

151 FARMINGTON AVE.

W101

HARTFORD, CT 06156

SUBJECT: GOODHEALTH WORLDWIDE ADMINISTRATORS INC.

REF: P05000054012

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refile this document until the quality has been improved.

The date of adoption of each amendment must be included in the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6906.

Darlene Connell
Regulatory Specialist II

FAX Aud. #: H09000207161
Letter Number: 309A00031314

RE-SUBMIT

Please retain original filing
date of submission 9/24

Articles of Amendment
to
Articles of Incorporation
of

Goodhealth Worldwide Administrators Inc.

(Name of Corporation as currently filed with the Florida Dept. of State)

205000054012

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

Actma Global Benefits Administrators Inc.

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

C. Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

New Registered Office Address:

(Florida street address)

_____ Florida
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

Treas

SECRETARY OF STATE
PALM BEACH, FLORIDA

09 SEP 24 PM 4: 14

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If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:
(Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>Treas</u>	<u>Jeremy J. Hall</u>	<u>_____</u> <u>_____</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>Treas</u>	<u>Kirk H. Lusk</u>	<u>151 Farmington Avenue</u> <u>Hartford, CT 06156</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>Secty</u>	<u>Edward C. Lea</u>	<u>151 Farmington Avenue</u> <u>Hartford, CT 06156</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

The date of each amendment(s) adoption: 9/21/09

Effective date if applicable: Upon filing
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____"
(voting group)

The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated September 21 2009

Signature _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Edward C. Lee
(Typed or printed name of person signing)

Secretary
(Title of person signing)